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# STATE OF SOUTH DAKOTA
# Statement of Legal Newspaper Ownership and Circulation

| | | |
|---|---|---|
| 1. TITLE OF NEWSPAPER Arlington Sun | | 2. DATE 9-28-2017 |
| 3. FREQUENCY OF ISSUE Weekly | 3A. NO. OF ISSUES PUBLISHED ANNUALLY 51 | 3B. ANNUAL SUBSCRIPTION PRICE $ 49.98/50.90 |
| 4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 208 S Main St, PO Box 370, Arlington, Kingsbury County, SD 57212-0370 | | |
| 5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) RFD Newspapers, Inc., 207 Kasan Ave, PO Box 18, Volga, SD 57071 | | |
| 6. FULL NAME OF PUBLISHER: Ken Reiste | | |
| 7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. FULL NAME — COMPLETE MAILING ADDRESS: Ken Reiste, PO Box 830, Clear Lake, SD 57226-0830 | | |
| 8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. None | | |

| 9. EXTENT AND NATURE OF CIRCULATION | AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS | ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE |
|---|---|---|
| A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies) | 800 | 800 |
| B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors, and counter sales. | 140 | 110 |
| 2. Mail Subscription (Paid and or requested) | 447 | 405 |
| 3. Paid Electronic Copies | 16 | 12 |
| C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.) | 603 | 527 |
| D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS | 21 | 0 |
| 2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES | 5 | 0 |
| E. TOTAL DISTRIBUTION (Sum of C, D1 and D2) | 629 | 527 |
| F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing | 144 | 273 |
| 2. Return from News Agents | 27 | 0 |
| G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.) | 800 | 800 |

**Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public**

**I swear that the statements made by me are true, correct, and complete:**

Ken Reiste
(Signature)

publisher
(Title)

State of South Dakota )
§
County of Deuel )

(Seal) BRENDA SCHAKE NOTARY PUBLIC SOUTH DAKOTA

Sworn to before me this 28th day of September, 2017

Brenda Schake
Notary Public

My commission expires: 9-21-21